

**CERTIFICATE OF TRANSMISSION****Date of Transmission: 10 May 2006**

I hereby certify that the following correspondence is being facsimile transmitted to the attention of the Director of the US Patent and Trademark Office on the above date via the following facsimile number: 571-273-2885.

PTOL-85 Part B - Fee(s) Transmittal (1 sheet)
PTO/SB/17 Fee Transmittal Form (1 sheet)
PTO-2038 Credit Card Payment Form (1 sheet)
Reply to Notice of Allowance (2 sheets)

Application Number 10/618,995
Confirmation No.: 5962
Filing Date: 14 July 2003
Document Submission Date: 10 May 2006
Docket: 1039-002

Art Unit: 3765
Examiner: Hoey, Alissa L.
Inventor: Boyles, Kathleen A.

Pages: 6

10 May 2006

Date

Eden Brown

Name of Certifier

Signature of Certifier

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PATENT

Application # 10/618,995

Attorney Docket # 1039-002

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s) : Kathleen Anne McHugh Boyles
Application # : 10/618,995
Confirmation # : 5962
Filed : 14 July 2003
Application Title : GARMENT WITH A COMPARTMENT
Art Unit # : 3765
Latest Examiner : HOEY, Alissa L.

Mail Stop Issue Fee
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

REPLY TO NOTICE OF ALLOWANCE

In reply to the Reasons for Allowance included in the Notice of Allowance mailed on 2 March 2006, the three month shortened statutory period for responding to which expires on 2 June 2006, the following remarks are respectfully submitted:

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PATENT

Application # 10/618,995

Attorney Docket # 1039-002

REMARKS**Comments on Statement of Reasons for Allowance**

The Examiner is respectfully thanked for the consideration provided to this application, and for allowing the claims. To the extent that any statements provided in the Reasons for Allowance reference any allowed claim without quoting the actual language of that allowed claim, attempt to characterize the subject matter of any allowed claim, and/or actually characterize the subject matter of any allowed claim, Applicant respectfully traverses.

CONCLUSION

The Office is hereby authorized to charge any additional fees or credit any overpayments under 37 C.F.R. 1.16 or 1.17 to Deposit Account No. 50-2504. The Examiner is invited to contact the undersigned at 434-972-9988 to discuss any matter regarding this application.

Respectfully submitted,

Michael Haynes PLC

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Date: 10 May 2006

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